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Document Number Only

CT Corporation System 660 East Jefferson Some Tallahassee, FL 3230 850-222-1092	treet	DATE: 8 / 18 3000033647- -08/18/000104 ****805.00 **	12
Uistava Administra	gion 12m	00 A	
	·		CHARACTER TO THE PARTY OF THE P
()Profit ()Nonprofit	()Amendment	()Merger P	
()Foreign ()LLC	()Dissolution ()Withdrawal	()Mark	
()Limited Partnership ()Reinstatement ()UCC () 1 or () 3	()UBR ()Fititious Name	()Other ()Ch. RA	
***Special Instructions**	,	······································	
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ADA Gage

Please Return Filed Stamped Copies To:

Jeffrey Butterfield

Thank You!

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, undersigned corporation organized under the laws of the St		ıе
submits the following statement in order to change its regist		ne
State of Florida.		
1. The name of the corporation is: Vistana Administration, Inc.		
<u> </u>	•	
2. The mailing address of the corporation is: PO Box 22197, L	ake Buena Vista, FL 32803-2197	
3. Date of incorporation/qualification: 6-21-96	Document number: P96000053021	
4. The name and address of the current registered agent and	office:	
Corporation Service Company		
1201 Hays Street		
Tallahassee, FL 32301	All	3
5. The name and address of the new registered agent and off	fice: (P. O. Box Not Acceptable)	7
CT Corporation System		
1200 S. Pine Island Road	E.F. S.A.	
Plantation, FL 33324	RIDA	
The street address of its registered office and the street adapent, as changed, will be identical.		
Such change was authorized by resolution duly adopted by authorized by the board.	by its board of directors or by an officer so	
Vistana Administration, Inc.	8-9-00	
(Signature of an officer, chairman or vice chairman of the	board) (Date)	
Susan Werth, Senior VP/Law, Secreta	ary	
(Printed or typed name and title)	(Date)	
Having been named as registered agent and to accept se corporation, I hereby accept the appointment as register I further agree to comply with the provisions of all status performance of my duties, and I am familiar with and acregistered agent.	red agent and agree to act in this capacity. tes relative to the proper and complete ccept the obligation of my position as	
registered agent.	8/16/00	
(Signature of Registered Agent)	(Date)	
If signing on behalf of an entity: PETER F. SOUZA ASSISTANT SECRETARY		
(Typed or Printed Name)	(Capacity)	• .
CD 2D(AS(A)OS)	FILING FEE: \$35.00	

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